

APR 19 2006

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|---|---------------------------------------|-------------------------|
| <b>FACSIMILE<br/>TRANSMITTAL<br/>FORM</b>   | Application Number                    | 10/661908               |
|   | Filing Date                           | September 12, 2003      |
|   | First Named Inventor                  | Smith, Samantha D.      |
|   | Art Unit                              | 1732                    |
|   | Examiner Name                         | Lechert Jr., Stephen J. |
| Fax: 571-273-8300                           | Attorney Docket Number                | 58575US002              |
| Total Number of Pages in This Submission: 5 |                                       |                         |
| Date: April 19, 2006                        | Attorney for Applicant: Sean J. Edman |                         |

| ENCLOSURES (check all that apply)  |  |  |
|--|--|--|
| <input type="checkbox"/> Fee Transmittal Form<br><input type="checkbox"/> Issue Fee Transmittal<br><input type="checkbox"/> Amendment Transmittal  | <input type="checkbox"/> Petition  | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences                    |
| <input checked="" type="checkbox"/> Amendment/Reply<br><input type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/Declaration(s)  | <input type="checkbox"/> Petition to Convert a Provisional Application       | <input type="checkbox"/> Appeal Communication to Technology Center (Appeal Notice, Brief, Reply Brief) |
| <input checked="" type="checkbox"/> Extension of Time Request  | <input type="checkbox"/> Power of Attorney, Revocation                       | <input type="checkbox"/> Proprietary Information   |
| <input type="checkbox"/> Express Abandonment Request   | <input type="checkbox"/> Change of Correspondence Address                    | <input type="checkbox"/> Status Letter   |
| <input type="checkbox"/> Information Disclosure Statement  | <input type="checkbox"/> Terminal Disclaimer                                 | <input type="checkbox"/> Other Enclosures:   |
| <input type="checkbox"/> Response to Missing Parts/Incomplete Application<br><input type="checkbox"/> Response to Missing Parts under 37 CFR § 1.52 or 1.53<br><input type="checkbox"/> Response to Missing Parts under 35 USC 371 in US Designated/ Elected Office (DO/EO/US) | <input type="checkbox"/> Request for Refund                                  |  |
|  | <input type="checkbox"/> Request for Continued Examination (RCE) Transmittal |  |
| <input type="checkbox"/> Drawings  | <input type="checkbox"/> After Allowance Communication to Technology Center  |  |
| REMARKS:   |  |  |

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